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Pamela Shirling  
Type or print name

*Pamela Shirling*  
Signature

May 19, 2005  
Date

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****IN RE PCT NATIONAL STAGE APPLICATION OF****KOTZIAN, GEORG****INTERNATIONAL APPLICATION NO: PCT/EP03/013024****I.A. FILING DATE: 20 NOVEMBER, 2003****U.S. APPLICATION NO: TO BE ASSIGNED****35 USC §371 DATE: HERewith****FOR: HERBICIDAL COMPOSITION**

Mail Stop PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**INFORMATION DISCLOSURE STATEMENT**

Sir:

This paper is being filed within three months of the date of entry of the national stage as set forth in 37 C.F.R. §1.491 of the international application. Therefore, no fees are required. If a fee is deemed to be required, the Commissioner is hereby authorized to charge such fee to Deposit Account No. 50-1676.

In accordance with 37 C.F.R. §1.56, applicant wishes to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

The listed references were cited in the international stage search report. Since these references are of record in the instant PCT application PCT/EP03/013024, copies are not enclosed herewith.

10/535686  
JC06 Rec'd PTO 19 MAY 2005

The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s).

Respectfully submitted,

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10/535686

Sheet 1 of 1

FORM PTO-1449  
(REV: 7-85)U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE

## INFORMATION DISCLOSURE CITATION

(Use several sheets if necessary)

ATTY. DOCKE  
7017  
APPLICATION NO.  
TO BE ASSIGNED  
APPLICANT  
KOTZIAN, GEORG  
FILING DATE  
HEREWITH

PCT/PTO 19 MAY 2005

Group

## U.S. PATENT DOCUMENTS

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA	6,743,753	6/1/04	MUKAIDA, ET AL.			
	AB						
	AC						
	AD						

## FOREIGN PATENT DOCUMENTS

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION YES NO	
	AE	01/24633	4/12/01	WO			<input type="checkbox"/>	<input type="checkbox"/>
	AF						<input type="checkbox"/>	<input type="checkbox"/>
	AG						<input type="checkbox"/>	<input type="checkbox"/>
	AH						<input type="checkbox"/>	<input type="checkbox"/>

## OTHER DOCUMENTS (Including Author, Title, Date, Pertinent pages, Etc.)

	AI	
	AJ	
	AK	
	AL	
	AM	
	AN	
	AO	
	AP	

EXAMINER

DATE CONSIDERED

\*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.